PTO/SB/17 (07-06)
Approved for use through 01/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Redu	ction Act of 1995	, no person are re	quired to	respond to a collection	n of information	on unless it displays	a valid OMB	control number.	
Effective on 12/08/2004.				Complete if Known					
ees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).						09/589,427			
FEE TRANSMITTAL						June 7, 2000			
For FY 2005				First Named Inventor		Yechiam YEMINI			
[						C. A. Revak			
X Applicant claims small entity status. See 37 CFR 1.27				Art Unit	2131	·	<del></del>		
TOTAL AMOUNT OF PAYMENT (\$) 525.00				Attorney Docket	No.	19240.229-US1			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
X Deposit Account Deposit Account Number: 08-0219 Deposit Account Name: Wilmer Cutler Pickering Hale and Dorr LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCI	H, AND EXA	MINATION FE	ES						
·		G FEES		ARCH FEES	EXAMIN	IATION FEES			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity	Fee (\$)	Small Entity	Eoon E	aid (\$)	
Utility	300	150	500	) <u>Fee (\$)</u> 250	200	<u>Fee (\$)</u> 100	rees r	aiu (\$)	
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEES	200	100	U	U	U	U		C	
2. EXCESS CLAIM FEES  Small Entity Fee Description  Fee (\$)									
Each claim over 20 (including Reissues)							50	25	
Each independent claim over 3 (including Reissues)							200	100	
Multiple dependent claims				360	180				
			Paid (\$)						
. =	× =		Fee (\$)			Fee Paid (\$)			
HP = highest number of total cla	ims paid for, if g	reater than 20.							
indep. Claims Extra	Claims F	ee (\$)	Fee I	Paid (\$)					
HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
	xtra Sheets			idditional 50 or frac	tion thereo	f Fee (\$)	Fee I	Paid (\$)	
- 100 =		/50		(round up to a who			=		
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): \$395 RCE Fee; \$130 Fee for Petiton Under 37 C.F.R. 1.313								525.00	
SUBMITTED BY	MA								
Signature	VWAR			Registration No. (Attorney/Agent)	40,934	Telephone	(212) 23	0-8800	
Name (Print/Type) Matthew	J. Byrne V			· · · · · · · · · · · · · · · · · · ·		Date	August 29	9, 2006	
<del></del>	<del></del>					<del></del>			

Express Mail Label No. EV 842148809 US Dated: August 29, 2006